

Work Order ID 85313

85313

Page 1

June-05-12 3:36:03 PM

Item ID: D407-667-105

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Crosstube Fwd

Start Date: 05/06/2012 Start Qty: 1.00

1

Cust Item ID:

Required Date: 19/06/2012 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan: MLJ

Date: 12/06/05 Tooling:

Date:

Run Start ***NR1***

QC:

Date: SPC (Y/N):

Date:

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
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D407-667-145	Rev C (DEO)
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DSI9565	A
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100

100

DC

Document Control

DOCUMENT CONTROL

Memo

Photocopy bluefile and create labels as per PPP D407-667-105 CHG004

0.00

0.00

0.00

0.00

110

110

Packaging

Packaging

Packaging

Memo

MO 12/7/31

for MLJ 12-8-14

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width:100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Supplier <input type="checkbox"/>	<input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Other <input type="checkbox"/>	<input type="checkbox"/>
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Supplier <input type="checkbox"/>	<input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Other <input type="checkbox"/>	<input type="checkbox"/>															

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Offset/Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unauthorized <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear	Hardware	General	
<input type="checkbox"/> Bending Passes Below Min <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimp at Bending <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Other <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Ripples on Inner Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Breaking <input type="checkbox"/> Missing <input type="checkbox"/> Size/Length <input type="checkbox"/> Spinning <input type="checkbox"/> Threading <input type="checkbox"/> Wrong Drill Holes <input type="checkbox"/> Misaligned <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Undersized <input type="checkbox"/> Too Many	<input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Documentation/Data <input type="checkbox"/> Finish <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Inspection Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Jigs/Fixtures/Tooling <input type="checkbox"/> Kit Incorrect <input type="checkbox"/> Kit Missing	<input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Off-Set <input type="checkbox"/> Orientation Misread <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Lost <input type="checkbox"/> Part Moved <input type="checkbox"/> Raw Material <input type="checkbox"/> Set-up <input type="checkbox"/> Supplier <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Work Order ID 85313

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Page 2

June 05-12 3:36:03 PM

Item ID: D407-667-105

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Item Name: Crosstube Fwd

Stop ***NS2***

Start Date: 05/06/2012 Start Qty: 1.00 ***1***

Cust Item ID:

Required Date: 19/06/2012 Req'd Qty: 1.00 ***1***

Customer:

Reference:

Approvals:	Process Plan:	Date:	Tooling:	Date:	Run Start *NR1*
	QC:	Date:	SPC (Y/N):	Date:	Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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120	BENDING MACHINE - CROSSTUBES	0.00							
120									
CNC Bend 2	Memo	0.00							
CNC Alpha 160 Bender	Bend tube as per Dwg D407-667-145 using CNC bender program 407-fw								

JK/mo 12/8/1

130	QC15- Crosstube Dimensional Check	0.00							
130									
QC	Memo	0.00							
Quality Control									

DAS
16
12/08/01

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td style="width: 25%;">Skid-tube <input type="checkbox"/></td> <td style="width: 25%;">Crosstube <input type="checkbox"/></td> <td style="width: 25%;">Prod. Eng. Coord. <input type="checkbox"/></td> <td style="width: 25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Supplier <input type="checkbox"/>		Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Other <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Supplier <input type="checkbox"/>																
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Other <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Offset/Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unauthorized <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear	Hardware	General	Maintenance
<input type="checkbox"/> Bending Passes Below Min <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimp at Bending <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Other <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Ripples on Inner Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Breaking <input type="checkbox"/> Missing <input type="checkbox"/> Size/Length <input type="checkbox"/> Spinning <input type="checkbox"/> Threading <input type="checkbox"/> Wrong Drill Holes <input type="checkbox"/> Misaligned <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Undersized <input type="checkbox"/> Too Many	<input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Documentation/Data <input type="checkbox"/> Finish <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Inspection Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Jigs/Fixtures/Tooling <input type="checkbox"/> Kit Incorrect <input type="checkbox"/> Kit Missing	<input type="checkbox"/> Set-up <input type="checkbox"/> Supplier <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____

Work Order ID 85313

June 05-12 3:36:03 PM

85313

Page 3

Item ID: D407-667-105

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Crosstube Fwd

Start Date: 05/06/2012 Start Qty: 1.00

1

Cust Item ID:

Required Date: 19/06/2012 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start ***NR1***

QC:

Date:

SPC (Y/N):

Date:

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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140

0.00

140

Crosstubes

0.00

Crosstubes

Crosstubes

Memo

1- scribe batch # inside of cuff

2-Drill pilot holes in tube using drill Jig DT8541 & DT8542 as per Dwg D407-667-145. Drill all (3) top holes use drill table jig DT8577 hole #1,#11 to set up towers, as per QSI0010.

3-Drill and Ream all holes in tube to finish size using drill Jig DT8541 & DT8542 as per Dwg D407-667-145 Check dimensions between holes on all four sides.

4-Flip tube and switch drilling Jigs from right to left, left to right. Locate Jigs off existing holes using "T" pins.

5-Drill pilot holes using drill Jig DT8541 & DT8542 as per Dwg 407-667-145. Drill only the top (2) holes.

6-Drill & ream the top (2) holes to finish size using drill Jig DT8541 & DT8542 as per Dwg D407-667-145

7-Drill Fwd rivet holes using drill Jig DT8787FWD as per Dwg D206-667-145. Note: Fwd side has 3x top holes.

8-Drill Aft rivet holes using drill Jig DT8787AFT as per Dwg D407-667-145.

9-C'sink holes as per Dwg D407-667-145. Allow rivet to sit below surface to compensate for paint.

10 -Deburr & Inspect for surface damage. Repair damage within limits as per

TW 12-8-2

MO 12/8/3

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> Other <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Offset/Setup											
Other											
Process											
Supplier											
Training											
Unauthorized											

FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending Passes Below Min <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimp at Bending <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Other <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Ripples on Inner Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	Hardware <input type="checkbox"/> Breaking <input type="checkbox"/> Missing <input type="checkbox"/> Size/Length <input type="checkbox"/> Spinning <input type="checkbox"/> Threading <input type="checkbox"/> Wrong Drill Holes <input type="checkbox"/> Misaligned <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Undersized <input type="checkbox"/> Too Many	General <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Documentation/Data <input type="checkbox"/> Finish <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Inspection Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Jigs/Fixtures/Tooling <input type="checkbox"/> Kit Incorrect <input type="checkbox"/> Kit Missing	<input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Off-Set <input type="checkbox"/> Orientation Misread <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Lost <input type="checkbox"/> Part Moved <input type="checkbox"/> Raw Material	<input type="checkbox"/> Set-up <input type="checkbox"/> Supplier <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other _____ _____ _____

Work Order ID 85313

85313

Page 4

June 05-12 3:36:03 PM

Item ID: D407-667-105

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Crosstube Fwd

Start Date: 05/06/2012 Start Qty: 1.00

1

Cust Item ID:

Required Date: 19/06/2012 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run Start ***NR1***

QC:

Date:

SPC (Y/N):

Date:

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
	Dwg D407-667-145								
150	Crosstubes Chemical Conversion	0.00							
150	HandFXtube	0.00							
	Hand Finishing Crosstubes								
160	QC7-Inspect Chemical Conversion Coat	0.00							
160	QC	0.00							
	Quality Control								
170	QC5- Inspect part completeness to step on W/O	0.00							
170	QC	0.00							
	Quality Control								

Memo

Memo

Memo

** Wear gloves **

DAS 16 12/08/03

** Wear gloves **

1- Clean crosstube with wash'n wipe

12-8-3

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td style="width: 25%;">Skid-tube <input type="checkbox"/></td> <td style="width: 25%;">Crosstube <input type="checkbox"/></td> <td style="width: 25%;">Prod. Eng. Coord. <input type="checkbox"/></td> <td style="width: 25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Supplier <input type="checkbox"/>		Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Other <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Engineering <input type="checkbox"/>															
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Offset/Setup									
Other									
Process									
Supplier									
Training									
Unauthorized									

FAULT CATEGORY

Landing Gear	Hardware	General	
<input type="checkbox"/> Bending Passes Below Min <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimp at Bending <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Other <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Ripples on Inner Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Breaking <input type="checkbox"/> Missing <input type="checkbox"/> Size/Length <input type="checkbox"/> Spinning <input type="checkbox"/> Threading <input type="checkbox"/> Wrong Drill Holes <input type="checkbox"/> Misaligned <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Undersized <input type="checkbox"/> Too Many	<input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Documentation/Data <input type="checkbox"/> Finish <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Inspection Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Jigs/Fixtures/Tooling <input type="checkbox"/> Kit Incorrect <input type="checkbox"/> Kit Missing	<input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Off-Set <input type="checkbox"/> Orientation Misread <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Lost <input type="checkbox"/> Part Moved <input type="checkbox"/> Raw Material <input type="checkbox"/> Set-up <input type="checkbox"/> Supplier <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other _____ _____ _____

Work Order ID 85313

85313

Page 5

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Item ID: D407-667-105

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Crosstube Fwd

Start Date: 05/06/2012 Start Qty: 1.00 ***1***

Cust Item ID:

Required Date: 19/06/2012 Req'd Qty: 1.00 ***1***

Customer:

Reference:

Approvals:	Process Plan:	Date:	Tooling:	Date:	Run Start *NR1*
	QC:	Date:	SPC (Y/N):	Date:	Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
180	Outsource process - NDT per QSI038 4.1	0.00							
180	<i>* Wear gloves *</i>								
Outsource2	Memo	0.00							
Outsource process - NDT	OUTSIDE SERVICE -CROSSTUBES Liquid Penetrant Inspection as per QSI 038 Or Issue P/O: <i>17609</i> LPI as per ASTM 1417 Level 2 Attach copy of NDT results to work order								<i>12-08-3</i>
190		0.00							
190	<i>* Wear gloves *</i>								
Packaging	Memo	0.00							
Packaging	Inspect for transit damage								
Packaging	Ensure copy of NDT results attached to work order.								<i>12/8/3</i>
200	QC5- Inspect part completeness to step on W/O	0.00							
200	<i>* Wear gloves *</i>								
QC	Memo	0.00							
Quality Control	Inspect for damage & ensure results are as per Dwg D206-667-145								<i>12 08 04</i>

204

** Wear gloves **

1- Pressure wash and use wash'n wipe to clean crosstube before chemical conversion

12-8-3

205

QC7

** Wear gloves **

12 08 04

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Supplier <input type="checkbox"/>	<input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Other <input type="checkbox"/>	<input type="checkbox"/>
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Supplier <input type="checkbox"/>	<input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Other <input type="checkbox"/>	<input type="checkbox"/>															

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Offset/Setup									
Other									
Process									
Supplier									
Training									
Unauthorized									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending Passes Below Min <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimp at Bending <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Other <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Ripples on Inner Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	Hardware <input type="checkbox"/> Breaking <input type="checkbox"/> Missing <input type="checkbox"/> Size/Length <input type="checkbox"/> Spinning <input type="checkbox"/> Threading <input type="checkbox"/> Wrong Drill Holes <input type="checkbox"/> Misaligned <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Undersized <input type="checkbox"/> Too Many	General <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Documentation/Data <input type="checkbox"/> Finish <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Inspection Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Jigs/Fixtures/Tooling <input type="checkbox"/> Kit Incorrect <input type="checkbox"/> Kit Missing	<input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Off-Set <input type="checkbox"/> Orientation Misread <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Lost <input type="checkbox"/> Part Moved <input type="checkbox"/> Raw Material <input type="checkbox"/> Set-up <input type="checkbox"/> Supplier <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
---	--	---	---

Work Order ID 85313

June 05-12 3:36:03 PM

85313

Page 6

Item ID: D407-667-105

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Crosstube Fwd

Start Date: 05/06/2012 Start Qty: 1.00 ***1***

Cust Item ID:

Required Date: 19/06/2012 Req'd Qty: 1.00 ***1***

Customer:

Reference:

Approvals: Process Plan: Date: Tooling: Date:

Run Start ***NR1***

QC: Date: SPC (Y/N): Date:

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
210	SprayPaint	0.00							
210	<i>DSI 9544 wash for clamp</i>								
SprayPaint	Memo	0.00							
Spray Painting	1-Prime inside and outside crosstube as per QSI 005 4.2								
	2-Paint outside crosstube with White Imron as per QSI 005 4.2								
	PRIME:								
	Start Time: <u>7:00</u>								
	Finish Time: <u>8:00</u>								
	PAINT:								
	Start Time: <u>1:00</u>								
	Finish Time: <u>2:00</u>								
220	QC14- Inspect Spray Paint	0.00							
220									
QC	Memo	0.00							
Quality Control	Then, Wrap in plastic bag to protect from scratches								

Wear gloves

*DSI
16
9-89*

12/05/09

12 08 04

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td style="width: 25%;">Skid-tube <input type="checkbox"/></td> <td style="width: 25%;">Crosstube <input type="checkbox"/></td> <td style="width: 25%;">Prod. Eng. Coord. <input type="checkbox"/></td> <td style="width: 25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Supplier <input type="checkbox"/>	<input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Other <input type="checkbox"/>	<input type="checkbox"/>
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Supplier <input type="checkbox"/>	<input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Other <input type="checkbox"/>	<input type="checkbox"/>															

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Offset/Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unauthorized <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear	Hardware	General	Maintenance
<input type="checkbox"/> Bending Passes Below Min	<input type="checkbox"/> Breaking	<input type="checkbox"/> Burrs	<input type="checkbox"/> Set-up
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> Missing	<input type="checkbox"/> Contamination	<input type="checkbox"/> Supplier
<input type="checkbox"/> Cracks	<input type="checkbox"/> Size/Length	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Temperature/Cure
<input type="checkbox"/> Crushed/Crimp at Bending	<input type="checkbox"/> Spinning	<input type="checkbox"/> Documentation/Data	<input type="checkbox"/> Weld
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Threading	<input type="checkbox"/> Finish	<input type="checkbox"/> Wrong Stock Pulled
<input type="checkbox"/> Other	<input type="checkbox"/> Wrong	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Other
<input type="checkbox"/> Positioned Wrong		<input type="checkbox"/> Inspection Unqualified	
<input type="checkbox"/> Ripples on Inner Bend	Drill Holes	<input type="checkbox"/> Instructions Incomplete/Unclear	
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Misaligned	<input type="checkbox"/> Jigs/Fixtures/Tooling	
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Ovalized	<input type="checkbox"/> Kit Incorrect	
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Over/Undersized	<input type="checkbox"/> Kit Missing	
	<input type="checkbox"/> Too Many		

Work Order ID 85313

85313

Page 7

June-05-12 3:36:03 PM

Item ID: D407-667-105

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Item Name: Crosstube Fwd

Stop ***NS2***

Start Date: 05/06/2012 Start Qty: 1.00 ***1***

Cust Item ID:

Required Date: 19/06/2012 Req'd Qty: 1.00 ***1***

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start ***NR1***
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
230		0.00							
230	Crosstubes								
Crosstubes		0.00							
Crosstubes	<p>Memo</p> <p>1-Abrade mating surfaces of support and crosstube with 400 grit sandpaper, clean the area with 4105S wash 'n' wipe</p> <p>2-Install supports with Proseal 890 per DSI9565 and QSI 015 A/R Proseal 890 Batch: <u>122441</u></p> <p>3- Torque bolts as per dwg</p> <p>4-Install nut plates as per Dwg D407-667-145. Touch-up rivet heads with Imron paint.</p>								
240	QC5- Inspect part completeness to step on W/O	0.00							
240									
QC									
Quality Control	Memo	0.00							

DAS
16
17/06/13

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> Other <input type="checkbox"/> </div> <div> Engineering Quality <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Offset/Setup											
Other											
Process											
Supplier											
Training											
Unauthorized											
FAULT CATEGORY											
Landing Gear			Hardware			General					
<input type="checkbox"/>	Bending Passes Below Min	<input type="checkbox"/>	Breaking	<input type="checkbox"/>	Burrs	<input type="checkbox"/>	Maintenance	<input type="checkbox"/>	Set-up		
<input type="checkbox"/>	Centre Not Concentric to O/S	<input type="checkbox"/>	Missing	<input type="checkbox"/>	Contamination	<input type="checkbox"/>	Mislabeled	<input type="checkbox"/>	Supplier		
<input type="checkbox"/>	Cracks	<input type="checkbox"/>	Size/Length	<input type="checkbox"/>	Cut Too Short	<input type="checkbox"/>	Off-Set	<input type="checkbox"/>	Temperature/Cure		
<input type="checkbox"/>	Crushed/Crimp at Bending	<input type="checkbox"/>	Spinning	<input type="checkbox"/>	Documentation/Data	<input type="checkbox"/>	Orientation Misread	<input type="checkbox"/>	Weld		
<input type="checkbox"/>	Inspection Strip in Tube	<input type="checkbox"/>	Threading	<input type="checkbox"/>	Finish	<input type="checkbox"/>	Out of Calibration	<input type="checkbox"/>	Wrong Stock Pulled		
<input type="checkbox"/>	Other	<input type="checkbox"/>	Wrong	<input type="checkbox"/>	Inspection Incomplete	<input type="checkbox"/>	Out of Sequence	<input type="checkbox"/>	Other		
<input type="checkbox"/>	Positioned Wrong	Drill Holes			<input type="checkbox"/>	Inspection Unqualified	<input type="checkbox"/>	Outside Dimensions			
<input type="checkbox"/>	Ripples on Inner Bend	<input type="checkbox"/>	Misaligned	<input type="checkbox"/>	Instructions Incomplete/Unclear	<input type="checkbox"/>	Over/Under tolerance	<input type="checkbox"/>			
<input type="checkbox"/>	Torque Waves in Extrusion	<input type="checkbox"/>	Ovalized	<input type="checkbox"/>	Jigs/Fixtures/Tooling	<input type="checkbox"/>	Part Lost	<input type="checkbox"/>			
<input type="checkbox"/>	Turning Sequence	<input type="checkbox"/>	Over/Undersized	<input type="checkbox"/>	Kit Incorrect	<input type="checkbox"/>	Part Moved	<input type="checkbox"/>			
<input type="checkbox"/>	Wave/Twist in Tube	<input type="checkbox"/>	Too Many	<input type="checkbox"/>	Kit Missing	<input type="checkbox"/>	Raw Material	<input type="checkbox"/>			

Work Order ID 85313

85313

Page 8

June-05-12 3:36:03 PM

Item ID: D407-667-105

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Crosstube Fwd

Start Date: 05/06/2012 Start Qty: 1.00

1

Cust Item ID:

Required Date: 19/06/2012 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start ***NR1***

QC:

Date:

SPC (Y/N):

Date:

Stop ***NR2***

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID Tool # Plan
Code

Accept Reject Reject Insp.
Qty Qty Number Stamp

250

Pick Kit

0.00

250

Packaging

Memo

0.00

Packaging

12/8/14 sf
80

260

QC4- 100% Inspect kits for completeness

0.00

260

QC

Memo

0.00

Quality Control

DA 1E 17/06/14

270

Packaging

0.00

270

Packaging

Memo

0.00

Packaging

Identify and pack for shipping as per PPP D407-667-105

Location: 53

PPP Rev: _____

12/8/14 sf

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Supplier <input type="checkbox"/>	<input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Other <input type="checkbox"/>	<input type="checkbox"/>
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Supplier <input type="checkbox"/>	<input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Other <input type="checkbox"/>	<input type="checkbox"/>															

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Offset/Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unauthorized <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear	Hardware	General	Maintenance
<input type="checkbox"/> Bending Passes Below Min <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimp at Bending <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Other <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Ripples on Inner Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Breaking <input type="checkbox"/> Missing <input type="checkbox"/> Size/Length <input type="checkbox"/> Spinning <input type="checkbox"/> Threading <input type="checkbox"/> Wrong Drill Holes <input type="checkbox"/> Misaligned <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Undersized <input type="checkbox"/> Too Many	<input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Documentation/Data <input type="checkbox"/> Finish <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Inspection Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Jigs/Fixtures/Tooling <input type="checkbox"/> Kit Incorrect <input type="checkbox"/> Kit Missing	<input type="checkbox"/> Set-up <input type="checkbox"/> Supplier <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Work Order ID 85313***85313***

Page 9

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Item ID: D407-667-105

Accept

N900040100Setup Start ***NS1***

Revision ID:

Item Name: Crosstube Fwd

Stop ***NS2***

Start Date: 05/06/2012 Start Qty: 1.00

1

Cust Item ID:

Required Date: 19/06/2012 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start ***NR1***

QC:

Date:

SPC (Y/N):

Date:

Stop ***NR2***Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run HoursTool ID Tool # Plan
CodeAccept Reject Reject Insp.
Qty Qty Number Stamp

280

QC21- Final Inspection - Work Order Release

0.00

280

QC

Memo

0.00

Quality Control

12/8/15
MLJ 12108/14

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> Other <input type="checkbox"/> </div> <div> Engineering Quality <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
<input type="checkbox"/>											
Equip/Tooling											
<input type="checkbox"/>											
Operator											
<input type="checkbox"/>											
Material											
<input type="checkbox"/>											
Offset/Setup											
<input type="checkbox"/>											
Other											
<input type="checkbox"/>											
Process											
<input type="checkbox"/>											
Supplier											
<input type="checkbox"/>											
Training											
<input type="checkbox"/>											
Unauthorized											
<input type="checkbox"/>											

FAULT CATEGORY									
Landing Gear			Hardware			General			
<input type="checkbox"/> Bending Passes Below Min	<input type="checkbox"/> Breaking	<input type="checkbox"/> Burrs	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Set-up					
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> Missing	<input type="checkbox"/> Contamination	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Supplier					
<input type="checkbox"/> Cracks	<input type="checkbox"/> Size/Length	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Off-Set	<input type="checkbox"/> Temperature/Cure					
<input type="checkbox"/> Crushed/Crimp at Bending	<input type="checkbox"/> Spinning	<input type="checkbox"/> Documentation/Data	<input type="checkbox"/> Orientation Misread	<input type="checkbox"/> Weld					
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Threading	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Calibration	<input type="checkbox"/> Wrong Stock Pulled					
<input type="checkbox"/> Other	<input type="checkbox"/> Wrong	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Other					
<input type="checkbox"/> Positioned Wrong		<input type="checkbox"/> Inspection Unqualified	<input type="checkbox"/> Outside Dimensions						
<input type="checkbox"/> Ripples on Inner Bend	Drill Holes	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Over/Under tolerance						
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Misaligned	<input type="checkbox"/> Jigs/Fixtures/Tooling	<input type="checkbox"/> Part Lost						
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Ovalized	<input type="checkbox"/> Kit Incorrect	<input type="checkbox"/> Part Moved						
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Over/Undersized	<input type="checkbox"/> Kit Missing	<input type="checkbox"/> Raw Material						
	<input type="checkbox"/> Too Many								

Picklist Print

June-05-12 3:36:07 PM

Page 1

Work Order ID: 85313

85313

Parent Item: D407-667-105

D407-667-105

Parent Item Name: Crosstube Fwd

Start Date: 05/06/2012

Required Date: 19/06/2012

Start Qty: 1.00

Required Qty: 1.00

Comments:

IPP Rev:F 05.09.01 Add holes for compatibility with Bell SkidtubesKJ/JLM
 IPP Rev:G 08-05-16 chg QC6 to QC15 DD verified by:EC
 IPP Rev:H 08-06-03 update as per DSI9415 (ECN1198) DD verified by:ec
 IPP Rev:I 08-07-14 add (scribe inside of tube) seq.6 DD verified by:EC
 IPP Rev:J 08-07-28 update as per (par 08-013) DD verified by:EC
 IPP Rev K 09.01.06 ECN 08-562 EC verified by:DD IPP REV:L
 11.08.05 PER ECN 11-615 DD VERF:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D407-667-105TRN		Manufactured	No			110	Each	2.0000	1	1			

D407-667-105TRN

Crosstube Turning Detail

85319

**

①

MO

12-7-31

Location

Loc Qty

Loc Code

LG

2

83841

1

83842

1

D2873-043

Manufactured No

230

Each

40.0000

2

2

D2873-043

Nut Plate Assembly

**

AS

12-8-7

Location

Loc Qty

Loc Code

LG052

40

72644

2

82949

38

D2873-045

Manufactured No

230

Each

33.0000

2

2

D2873-045

Nut Plate Assembly

**

AS

12-8-7

Location

Loc Qty

Loc Code

LG052

33

82947

33

D206-667-017

88731

1X

②

①

AS

12-8-7

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> Other <input type="checkbox"/> </div> <div> Engineering Quality <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Offset/Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unauthorized <input type="checkbox"/>											

FAULT CATEGORY									
Landing Gear			Hardware			General			
<input type="checkbox"/> Bending Passes Below Min	<input type="checkbox"/> Breaking	<input type="checkbox"/> Burrs	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Set-up					
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> Missing	<input type="checkbox"/> Contamination	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Supplier					
<input type="checkbox"/> Cracks	<input type="checkbox"/> Size/Length	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Off-Set	<input type="checkbox"/> Temperature/Cure					
<input type="checkbox"/> Crushed/Crimp at Bending	<input type="checkbox"/> Spinning	<input type="checkbox"/> Documentation/Data	<input type="checkbox"/> Orientation Misread	<input type="checkbox"/> Weld					
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Threading	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Calibration	<input type="checkbox"/> Wrong Stock Pulled					
<input type="checkbox"/> Other	<input type="checkbox"/> Wrong	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Other					
<input type="checkbox"/> Positioned Wrong	Drill Holes		<input type="checkbox"/> Outside Dimensions						
<input type="checkbox"/> Ripples on Inner Bend	<input type="checkbox"/> Misaligned	<input type="checkbox"/> Inspection Unqualified	<input type="checkbox"/> Over/Under tolerance						
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Ovalized	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost						
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Over/Undersized	<input type="checkbox"/> Jigs/Fixtures/Tooling	<input type="checkbox"/> Part Moved						
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Too Many	<input type="checkbox"/> Kit Incorrect	<input type="checkbox"/> Raw Material						
		<input type="checkbox"/> Kit Missing							

Picklist Print

June-05-12 3:36:07 PM

Page 2

Work Order ID: 85313

Parent Item: D407-667-105

Parent Item Name: Crosstube Fwd

85313

D407-667-105

Start Date: 05/06/2012

Required Date: 19/06/2012

Start Qty: 1.00

Required Qty: 1.00

D2891-1

Manufactured No

230

Each

37.0000

2

2

D2891-1

2.25 Support

**

AB 12-8-7

Location

Loc Qty

Loc Code

LG051

20

84164

20

LG052

17

72822

1

75176

1

82277

15

D3595-063-395

Manufactured No

230

Each

46.0000

4

4

D3595-063-395

RUBBER CUSHION

**

AB 12-8-7

Location

Loc Qty

Loc Code

LG051

46

82223

46

MS20601-AD4W10

Purchased No

230

Each

204.0000

14

14

MS20601-AD4W10

RIVET

**

AB 12-8-7

Location

Loc Qty

Loc Code

LG050

203

120676

3

121690

100

122227

100

LG051

1

118675

1

125125

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> Other <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Offset/Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unauthorized <input type="checkbox"/>											

FAULT CATEGORY			
Landing Gear <input type="checkbox"/> Bending Passes Below Min <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimp at Bending <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Other <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Ripples on Inner Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	Hardware <input type="checkbox"/> Breaking <input type="checkbox"/> Missing <input type="checkbox"/> Size/Length <input type="checkbox"/> Spinning <input type="checkbox"/> Threading <input type="checkbox"/> Wrong Drill Holes <input type="checkbox"/> Misaligned <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Undersized <input type="checkbox"/> Too Many	General <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Documentation/Data <input type="checkbox"/> Finish <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Inspection Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Jigs/Fixtures/Tooling <input type="checkbox"/> Kit Incorrect <input type="checkbox"/> Kit Missing	<input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Off-Set <input type="checkbox"/> Orientation Misread <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Lost <input type="checkbox"/> Part Moved <input type="checkbox"/> Raw Material <input type="checkbox"/> Set-up <input type="checkbox"/> Supplier <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Picklist Print

June-05-12 3:36:07 PM

Page 3

Work Order ID: 85313

85313

Parent Item: D407-667-105

D407-667-105

Parent Item Name: Crosstube Fwd

Start Date: 05/06/2012

Required Date: 19/06/2012

Start Qty: 1.00

Required Qty: 1.00

MS21920-20

Purchased

No

230

Each

86.0000

4

4

MS21920-20

Clamp (per MIL-DTL-8783C)

**

AP 12-8-7

Location

Loc Qty

Loc Code

LG050

86

116799

8

120676

8

121067

20

121274

50

AN5-10A

Purchased

No

250

Each

215.0000

10

10

AN5-10A

Bolt

**

11/22/51

SP

Location

Loc Qty

Loc Code

ST337

215

118191

80

121181

35

121243

100

AN5-30A

Purchased

No

250

Each

65.0000

4

4

AN5-30A

BOLT

**

12/8/14

SP

Location

Loc Qty

Loc Code

ST339

65

117514

7

120423

3

120910

25

121259

30

June-05-12 3:36:07 PM

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Page 3

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Supplier <input type="checkbox"/>	<input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Other <input type="checkbox"/>	<input type="checkbox"/>
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Supplier <input type="checkbox"/>	<input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Other <input type="checkbox"/>	<input type="checkbox"/>															

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Offset/Setup									
Other									
Process									
Supplier									
Training									
Unauthorized									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending Passes Below Min <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimp at Bending <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Other <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Ripples on Inner Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	Hardware <input type="checkbox"/> Breaking <input type="checkbox"/> Missing <input type="checkbox"/> Size/Length <input type="checkbox"/> Spinning <input type="checkbox"/> Threading <input type="checkbox"/> Wrong Drill Holes <input type="checkbox"/> Misaligned <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Undersized <input type="checkbox"/> Too Many	General <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Documentation/Data <input type="checkbox"/> Finish <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Inspection Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Jigs/Fixtures/Tooling <input type="checkbox"/> Kit Incorrect <input type="checkbox"/> Kit Missing	<input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Off-Set <input type="checkbox"/> Orientation Misread <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Lost <input type="checkbox"/> Part Moved <input type="checkbox"/> Raw Material <input type="checkbox"/> Set-up <input type="checkbox"/> Supplier <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other _____ _____ _____
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Picklist Print

June-05-12 3:36:07 PM

Page 4

Work Order ID: 85313

85313

Parent Item: D407-667-105

D407-667-105

Parent Item Name: Crosstube Fwd

Start Date: 05/06/2012

Required Date: 19/06/2012

Start Qty: 1.00

Required Qty: 1.00

AN5-32A

Purchased

No

250

Each

245.0000

4

4

**

AN5-32A

Bolt

Location

Loc Qty

Loc Code

ST339

145

119862

50

120423

75

120910

20

ST340

100

121541

100

AN960JD516

NAS1149D0563J

Purchased

No

250

Each

0.0000

18

18

**

AN960JD516

Washer

MS21042L5

Purchased

No

250

Each

1,409.000

4

4

**

MS21042L5

Nut

Location

Loc Qty

Loc Code

300

500

121652

500

ST300

909

108827

8

116105

5

116548

43

117611

18

119109

827

17651

8

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: Date:

QA Closed: Date:

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION		AGAINST DEPARTMENT/PROCESS							
	Rework	<input type="checkbox"/>	Skid-tube	<input type="checkbox"/>	Crosstube	<input type="checkbox"/>	Prod. Eng. Coord.	<input type="checkbox"/>	Engineering	<input type="checkbox"/>
	Scrap	<input type="checkbox"/>	Machining	<input type="checkbox"/>	Small Fab	<input type="checkbox"/>	Rec/Store/Packaging	<input type="checkbox"/>	Quality	<input type="checkbox"/>
	Use-as-is	<input type="checkbox"/>	Thermoforming	<input type="checkbox"/>	Finishing	<input type="checkbox"/>	Supplier	<input type="checkbox"/>		<input type="checkbox"/>
	Work Order Update	<input type="checkbox"/>	Large Fab	<input type="checkbox"/>	Composite	<input type="checkbox"/>	Other	<input type="checkbox"/>		<input type="checkbox"/>

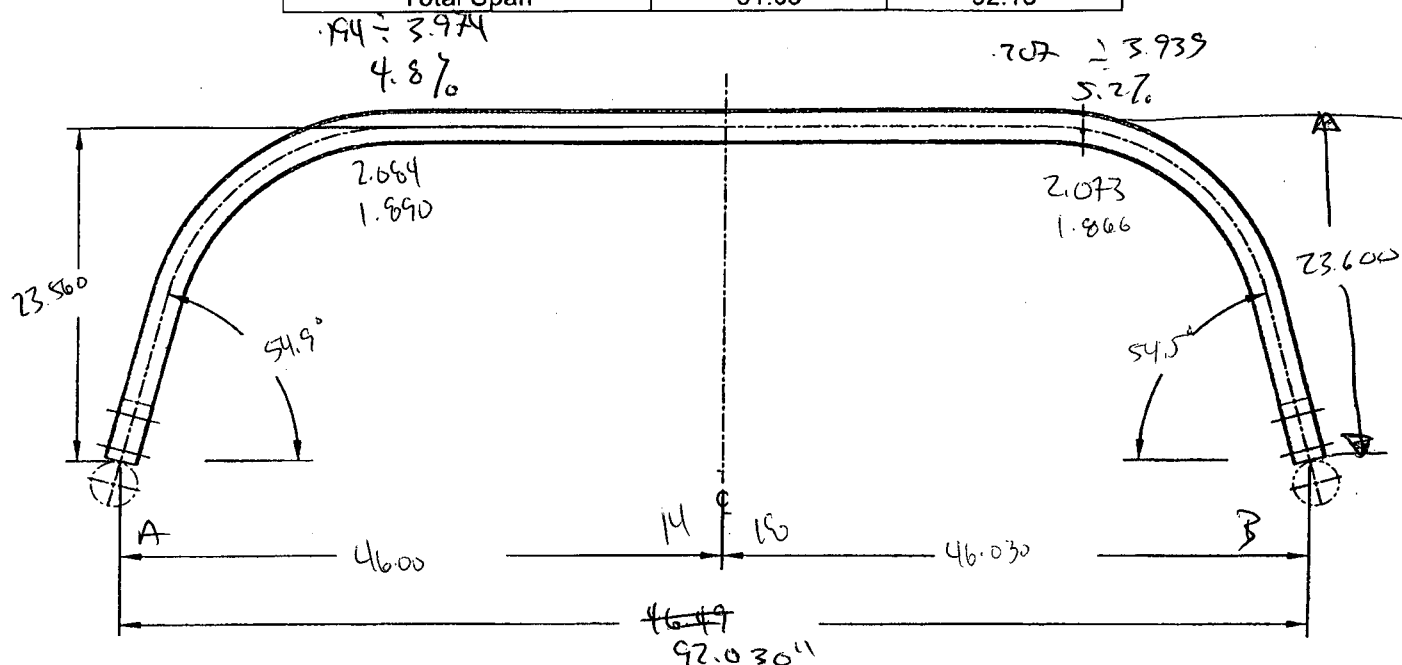
Root Cause		Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data										
Equip/Tooling										
Operator										
Material										
Offset/Setup										
Other										
Process										
Supplier										
Training										
Unauthorized										

FAULT CATEGORY

Landing Gear		Hardware		General	
<input type="checkbox"/> Bending Passes Below Min	<input type="checkbox"/> Breaking	<input type="checkbox"/> Burrs	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Set-up	
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> Missing	<input type="checkbox"/> Contamination	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Supplier	
<input type="checkbox"/> Cracks	<input type="checkbox"/> Size/Length	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Off-Set	<input type="checkbox"/> Temperature/Cure	
<input type="checkbox"/> Crushed/Crimp at Bending	<input type="checkbox"/> Spinning	<input type="checkbox"/> Documentation/Data	<input type="checkbox"/> Orientation Misread	<input type="checkbox"/> Weld	
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Threading	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Calibration	<input type="checkbox"/> Wrong Stock Pulled	
<input type="checkbox"/> Other	<input type="checkbox"/> Wrong	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Out of Sequence		
<input type="checkbox"/> Positioned Wrong		<input type="checkbox"/> Inspection Unqualified	<input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Other	
<input type="checkbox"/> Ripples on Inner Bend	Drill Holes	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Over/Under tolerance		
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Misaligned	<input type="checkbox"/> Jigs/Fixtures/Tooling	<input type="checkbox"/> Part Lost		
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Ovalized	<input type="checkbox"/> Kit Incorrect	<input type="checkbox"/> Part Moved		
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Over/Undersized	<input type="checkbox"/> Kit Missing	<input type="checkbox"/> Raw Material		
	<input type="checkbox"/> Too Many				

DART AEROSPACE LTD		Work Order:	85313
Description: Crosstube High Fwd (407)		Part Number:	D407-667-105
Inspection Dwg: D407-667-145 Rev: C		Page 1 of 1	

Required Dimension	Min	Max
Height	23.41	23.67
1/2 Span	45.81	46.07
Angle	54	56
Total Span	91.63	92.13



Comments
Side A = 4.8% crushing @ 14 Passes
Side B = 5.27% crushing @ 18 Passes

QC15 Inspection	DAS
Date	16 17/06/01

Rev	Date	Change	Revised by	Approved
A	07.02.06	New Issue	KJ/JM	
B	09.11.12	Dimensions updated per Dwg Rev C	KJ	

DART SERVICE INSTRUCTION

TO AMEND INSTRUCTIONS FOR CONTINUOUS AIRWORTHINESS ICA-D206-667 Rev. 3 OR LATER
REF. CANADIAN STC: SH01-5
REF. FAA STC: SR01304NY
REF. EASA STC: EASA.IM.R.S.01179

PURPOSE:

The supports on the following crosstubes are now installed using Proseal instead of Magnobond:

D206-667-101 @ CHG 004
D206-667-103 @ CHG 005
D206-667-107 @ CHG 002
D206-667-201 @ CHG 004

D206-667-203 @ CHG 004
D206-667-207 @ CHG 002
D407-667-105 @ CHG 004

CHANGE:

For the crosstubes listed above, section 32.4 of ICA-D206-667 is amended as follows. Use Figures 32-4 to 32-8 of ICA-D206-667 for further reference. For crosstubes of an earlier change number, it is recommended that if the supports are removed, the supports should be reinstalled using the procedure listed below.

32.4 SUPPORT INSTALLATION





- 32.4.1 Locate the area on crosstube for installation of support (ref. Figures 32-4 to 32-8 of ICA-D206-667). For D206-667-101/-103/-107/-201 and D407-667-105 crosstubes, the outward face of the support tabs should be 13.08" (332mm) from the crosstube center. For D206-667-203/-207 crosstubes, the outward face of the support tabs should be 10.03" (255mm) from the crosstube center. Ensure paint finish of crosstube is intact; touch up as required per Chapter 5 (5.3.9) of ICA-D206-667.
- 32.4.2 If present, remove any paint/primer on bottom of supports. Abrade mating surfaces of support and crosstube with 400-grit sandpaper. Saturate a clean cloth with MEK or 4105S Wash'n'Wipe Degreaser or equivalent and wipe until there is no residue.
- 32.4.3 Ensure a layer of 3M Scotch-Weld 2216 B/A Epoxy Adhesive is on the bottom of the support. If required, either apply or touch-up support to have a 0.03" to 0.05" thick layer of adhesive over the entire mating surface. Allow supports to cure for 24 hours.
- 32.4.4 Abrade mating surfaces of support (after cure) and crosstube with 180-grit sandpaper. Saturate a clean cloth with MEK or 4105S Wash'n'Wipe Degreaser or equivalent and wipe until there is no residue.
- 32.4.5 Apply a 0.04" to 0.07" thick layer of Proseal 890 Class B or AMS-S-8802 Class B sealant underneath applicable support and install support.
- 32.4.6 Install the clamps opposite to crosstube support as shown in Figures 32-4 to 32-8 of ICA-D206-667. Install rubber cushions underneath each clamp around the bottom circumference of the crosstube up to the crosstube centerline. Torque clamps 80-100 in-lb (9.0-11.3 Nm). It is acceptable to use smaller or larger sized MS21920-XX clamps than those listed in ICA-D206-667, ensure that after torquing the clamps per this instruction, the nuts are in safety but not bottomed out.
- 32.4.7 Prior to installing crosstube on aircraft, allow supports to cure for 72 hours and recheck torque on clamps.

CANADA
DEPARTMENT OF TRANSPORT
AIRCRAFT CERTIFICATION
BRANCH
DAO # 01-Q-01

APPROVED

BY: 
D. SHEPHERD (DE # 02)

DATE: 11.07.20
CERT. NO.: SH01-5
ISSUE NO.: 3

A	NEW ISSUE	CP	11.07.15
REV.	DESCRIPTION	BY	DATE
DESIGN		DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN			
CHECKED	ASS	DRAWING NO.	REV. A
MFG. APPR.	N/A	DSI 9565	SHEET 1 OF 1
APPROVED		TITLE	SCALE
DE APPR.		SUPPORT INSTALLATION CHANGE	NTS
DATE	11.07.15	COPYRIGHT © 2011 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	

NO. 25313
WORK ORDER
12/06/05

SUBJECT TO AMENDMENT

WITHOUT NOTICE

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ENGINEERING

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Item	Qty -145*	Part Number	Description
1	X	D407-667-145	CROSSTUBE ASSEMBLY (407 HIGH FWD)
2	1	D6010-115	CROSSTUBE
3	2	D2873-043	NUT PLATE
4	2	D2873-045	NUT PLATE
5	2	D2891-1	SUPPORT
6	4	D3595-063-395	RUBBER CUSHION
7	4	MS21920-20	CLAMP (OR MS21920-21)
8	14	MS20601AD4W10	RIVET (OR NAS9302B-4-10)
9	A/R	MAGNOBOND 6398	ROCKWELL SPECIFICATION RBO-120-023 ADHESIVE (TEXTRON/BELL SPEC. 299- 947-100, TYPE II, CLASS 2 ADHESIVE)

GENERAL NOTES:

- 1) MATERIAL: MANUFACTURED FROM D6010-115
FINISHED LENGTH = 113.20±0.020
- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2
PAINT OUTSIDE PER DART QSI 005 4.2
- 3) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED.
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED.
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX.
- 6) IDENTIFICATION: SCRIBE DART PART NUMBER "D407-667-145" AND BATCH NUMBER ON
INSIDE OF CUFF USING VIBRATING STYLUS.
- 7) WEIGHT: 17.8 lbs
- 8) PART IS SYMMETRIC ABOUT CENTERLINE.
- 9) RUN CUTTER OFF PART WHERE INDICATED. BLEND OUT EDGE LONGITUDINALLY,
TRANSITION SHOULD BE SMOOTH.
- 10) BEND PROGRESSIVELY WITH A MINIMUM OF 6 PASSES. MAXIMUM TUBE FLATTENING DUE
TO BENDING IS 6% BASED ON O.D.
- 11) LIQUID PENETRANT INSPECT OUTSIDE SURFACE OF CROSSTUBE PER QSI 038.
- 12) INSTALL D2891-1 SUPPORT USING 0.03" TO 0.06" THICK LAYER OF MAGNOBOND 6398 PER
QSI 015. LET CURE FOR 12 HOURS AFTER INSTALLATION AND PRIOR TO PACKAGING.
- 13) INSTALL MS21920-20 CLAMPS (OR -21) WITH D3595-063-395 RUBBER CUSHIONS TO SECURE
THE D2891-1 SUPPORT ON TOP SIDE OF THE CROSSTUBE. ENSURE CLAMP MECHANISMS
ARE LOCATED ON CROSSTUBE SUPPORTS.
- 14) EXTREME CARE MUST BE TAKEN TO PROTECT THE OUTSIDE SURFACE OF THE TUBE. THE
OUTSIDE SURFACE MUST BE SMOOTH AND FREE FROM SURFACE DEFECTS SUCH AS
SCRATCHES, NICKS, OR DENTS. DEFECTS UP TO 0.005" MAY BE BLENDED OUT
LONGITUDINALLY. CIRCUMFERENTIAL GRIND MARKS ARE UNACCEPTABLE.
- 15) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS ARE SHOWING IN
SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.

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SUBJECT TO AMENDMENT
WITHOUT NOTICE
WORK ORDER
NO. 85313 MLJ
12/06/05

DEO ATTACHED

ECW #11-615
11.07.26

UNDER REVIEW

RELEASED
03/11/12 MLJ

C	REVISE GENERAL NOTES/PART LIST (ZN D7-1); REORGANIZED VIEWS AND REFORMATTED DRAWING TO CURRENT STANDARDS. D3595-063-395 WAS D2856-400-694 (ZN D6-2 & A5-2); REMOVED REF. 7 ADD TOLERANCES (ZN C6-3, C4-3, D2-3); RELOCATED FLAG #6 (ZN A8-3) PER NCR 210; MOVED TURNING DETAIL & UPDATED TOLERANCE TO SHEET 4.	RF	08.11.06
B	ADD HOLES AND NUT PLATES FOR COMPATABILITY WITH BHT/AA SKUDTUBES	PH	05.07.26
A	NEW ISSUE	CP	02.05.08
REV.	DESCRIPTION	BY	DATE
DESIGN	<u>RF</u>	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA DRAWING NO. REV. C D407-667-145 SHEET 1 OF 4 TITLE SCALE CROSSTUBE ASS'Y (407 HIGH FWD) NTS	
DRAWN	<u>RF</u>		
CHECKED	<u>RF</u>		
MFG. APPR.	<u>RF</u>		
APPROVED	<u>RF</u>		
DE APPR.	<u>RF</u>	DATE 08.11.06 <small>COPYRIGHT © 2002 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COMMERCIALIZED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	

8 7 6 5 4 3 2 1

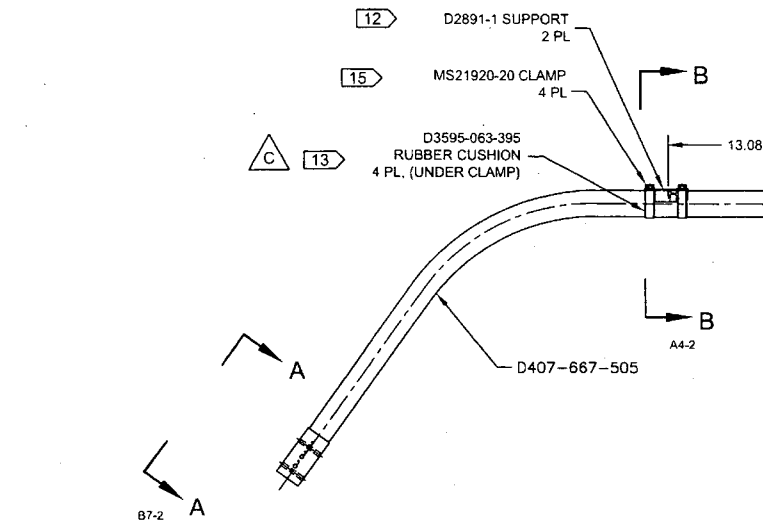
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11.07.28

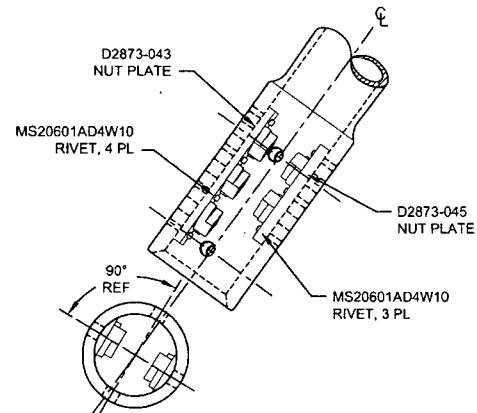
UNDER REVIEW

RELEASE
08/11/06

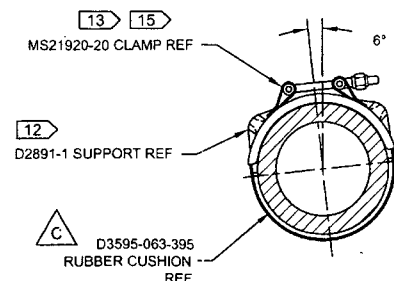
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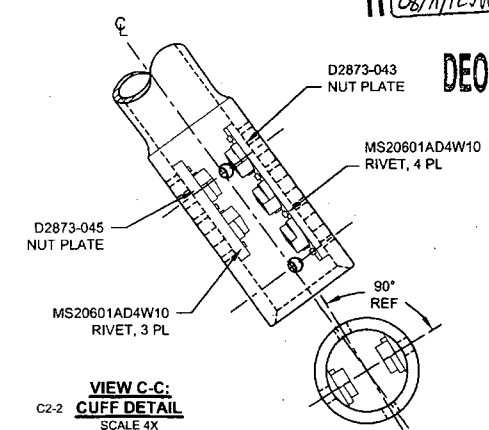
D407-667-145
ASSEMBLY DETAIL
(VIEW LOOKING FWD)



VIEW A-A:
CUFF DETAIL
SCALE 4X



SECTION B-B
SCALE 5X



VIEW C-C:
CUFF DETAIL
SCALE 4X

DESIGN	Q	DART AEROSPACE LTD	
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED	Q	DRAWING NO.	REV. C
MFG. APPR.	Q	D407-667-145	SHEET 2 OF 4
APPROVED	Q	TITLE	SCALE
DE APPR.	Q	CROSSTUBE ASS'Y (407 HIGH FWD)	NTS
DATE	08.11.06	<small>COPYRIGHT © 2002 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSES OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	

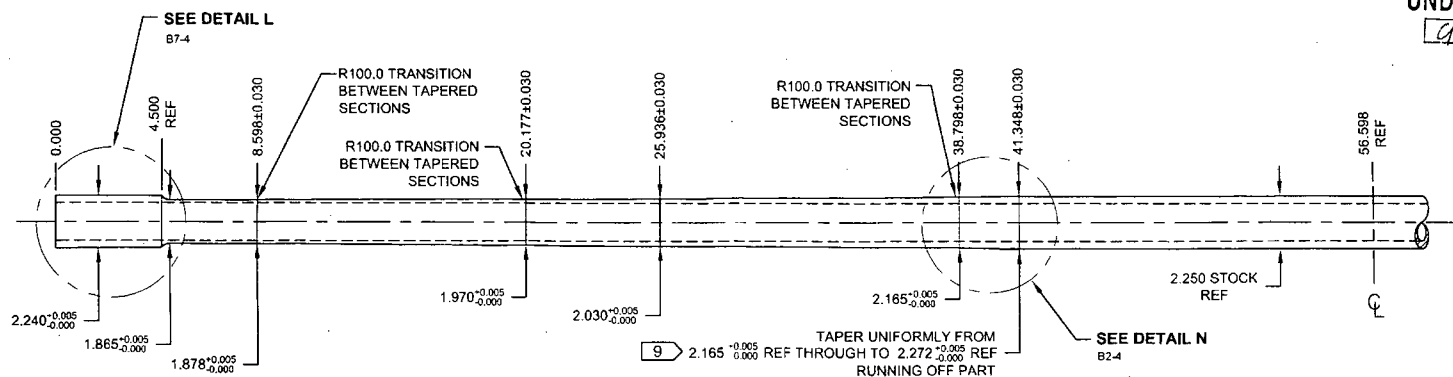
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UNDER REVIEW

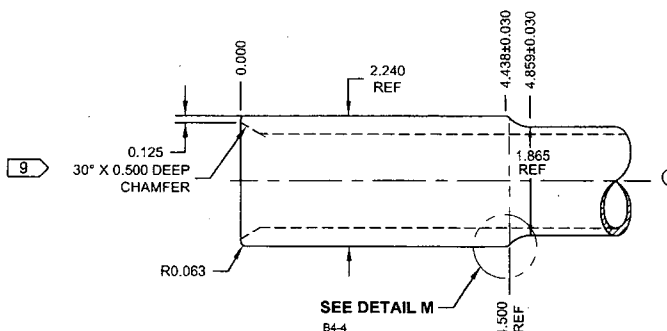
08/11/06

620 H.L. 615
11.07.26

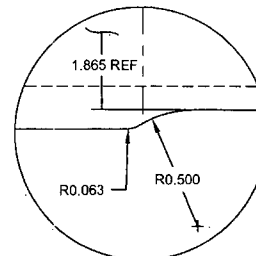
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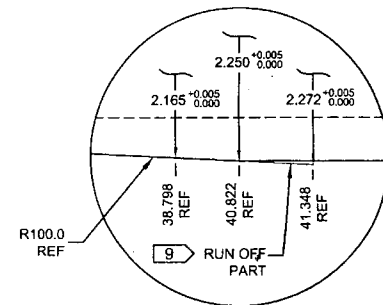
TURNING DETAIL



**DETAIL L:
CROSSTUBE CUFF**
NOT TO SCALE



**DETAIL M:
CUFF TRANSITION**
NOT TO SCALE



**DETAIL N:
TAPER RUN-OFF**
NOT TO SCALE

DEO ATTACHED
RELEASED
08/11/06

DESIGN	08	DART AEROSPACE LTD	
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED	08	DRAWING NO.	REV. C
MFG. APPR.	08	D407-667-145	SHEET 4 OF 4
APPROVED	08	TITLE	SCALE
DE APPR.	08	CROSSTUBE ASS'Y (407 HIGH FWD)	NTS
DATE	08.11.06	COPYRIGHT © 2003 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONCOITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR FOR ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	

DRAWING NO. D407-667-145	TITLE CROSSTUBE ASS'Y (407 HIGH FWD)	REV. C	DART AEROSPACE LTD ENGINEERING ORDER		D.E.O. NO. D407-667-145-C-1	SHEET NO. SHEET 1 OF 1	SCALE NTS
DRAWN <i>92</i>	CHECKED <i>ASS</i>	MFG. APPR. <i>IB</i>	APPROVED <i>WD</i>		DE APPR. <i>##</i>		
DATE 11.07.15	DATE <i>11.07.22</i>	DATE <i>11.07.22</i>	DATE <i>11/07/22</i>		DATE <i>11.07.21</i>		

PURPOSE:

REPLACE MAGNOBOND WITH PROSEAL.

CHANGE:

IS:

Item	Qty -145	Part Number	Description
9	A/R	PROSEAL 890 B-2	SEALANT, AMS-S-8802 CLASS B-2

WAS:

9	A/R	MAGNOBOND 6398	ROCKWELL SPECIFICATION RBO-120-023 ADHESIVE (TEXTRON/BELL SPEC. 299-947-100, TYPE II, CLASS 2 ADHESIVE)
---	-----	----------------	---

NOTE 12 & 15, SHEET 1 IS AMENDED AS FOLLOWS:

IS:

12) TO INSTALL D2891-1 SUPPORT: ABRAD MATING SURFACE OF SUPPORT AND CROSSTUBE WITH 180-GRIT SANDPAPER AND REMOVE RESIDUE WITH MEK (OR EQUIVALENT). APPLY A 0.04" TO 0.07" THICK LAYER OF PROSEAL 890 CLASS B-2 (OR AMS-S-8802 CLASS B-2) SEALANT TO MATING SURFACE OF SUPPORT.

15) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING. **PRIOR TO PACKAGING, RE-CHECK TORQUE ON CLAMPS AFTER PROSEAL 890 SEALANT HAS CURED FOR 72 HOURS.**

WAS:

12) INSTALL D2891-1 SUPPORT USING 0.03" TO 0.06" THICK LAYER OF MAGNOBOND 6398 PER QSI 015. LET CURE FOR 12 HOURS AFTER INSTALLATION AND PRIOR TO PACKAGING.

15) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.

RELEASED
2011-07-28
WD

DART SERVICE INSTRUCTION

TO AMEND INSTALLATION INSTRUCTIONS IIN-D206-667 REV. C AND EARLIER AND
INSTRUCTIONS FOR CONTINUED AIRWORTHINESS ICA-D206-667 REV. 2 AND EARLIER

REF: CANADIAN STC: SH01-5

REF: FAA STC: SR01304NY

REF: EASA STC: EASA.IM.R.S.01179

PURPOSE

The purpose of this service instruction is to add the optional D206-667-017 Kit and provide guidelines to install extra clamps on D206-667-101/-103 or D407-667-105 forward crosstubes to allow fastening of OEM grounding straps.

INSTRUCTIONS:

- 1) If installed, follow Section 32.1 of ICA-D206-667 for removal of the forward crosstube from the helicopter.
- 2) Locate AN742D36 Clamp as shown in Figure 1 of this service instruction and mark location of clamp on the crosstube.
- 3) Remove crosstube finish (paint and primer) in area where AN742D36 Clamp will be installed and touch up affected area with chemical film material (Alodine 1200 or 1201) per MIL-C-5541.
- 4) Install AN742D36 Clamp complete with MS9165-05 per Section A-A of Figure 1 of this service instruction.
- 5) Touch up paint as required per Item 5.3.3 of ICA-D206-667.
- 6) Seal edges where AN742D36 Clamp meets with crosstube using Sikaflex-241/291 or MIL-S-8802 Class B2 or Proseal 890 sealant.
- 7) Install/re-install forward crosstube in accordance with Section 32.2 of ICA-D206-667.
- 8) Fasten OEM grounding strap to MS9165-05 Angle Bracket on forward crosstube per Bell instructions.
- 9) Undertake a resistance check between a ground point on the skidtube and aircraft ground in accordance with Class R-II requirement per BHT-ELEC-SPM. Maximum resistance is 10 milliohms (mΩ).

PARTS LIST:

QTY -017	PART NUMBER	DESCRIPTION
X	D206-667-017	GROUNDING STRAP INSTALLATION
2	AN742D36	CLAMP
2	MS9165-05	ANGLE BRACKET
2	MS21042-3	NUT
2	MS27039-1-08	SCREW
4	NAS1149C0332R	WASHER

WEIGHT AND BALANCE

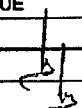




There is a negligible weight change associated with the installation of this kit.

CANADA
DEPARTMENT OF TRANSPORT
AIRCRAFT CERTIFICATION
BRANCH
DAO # 01-O-01

APPROVED

BY: 
D. SHEPHERD (DE # 02)

DATE: 11.02.25
CERT. NO.: SH01-5
ISSUE NO.: 3

A	NEW ISSUE	MB	11.02.18
REV.	DESCRIPTION	BY	DATE
DESIGN		DART AEROSPACE LTD	
DRAWN		HAWKESBURY, ONTARIO, CANADA	
CHECKED		DRAWING NO.	REV. A
MFG. APPR.	N/A	DSI 9544	SHEET 1 OF 2
APPROVED		TITLE	SCALE
DE APPR.		GROUNDING STRAP INSTALLATION	NTS
DATE	11.02.18	COPYRIGHT © 2011 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

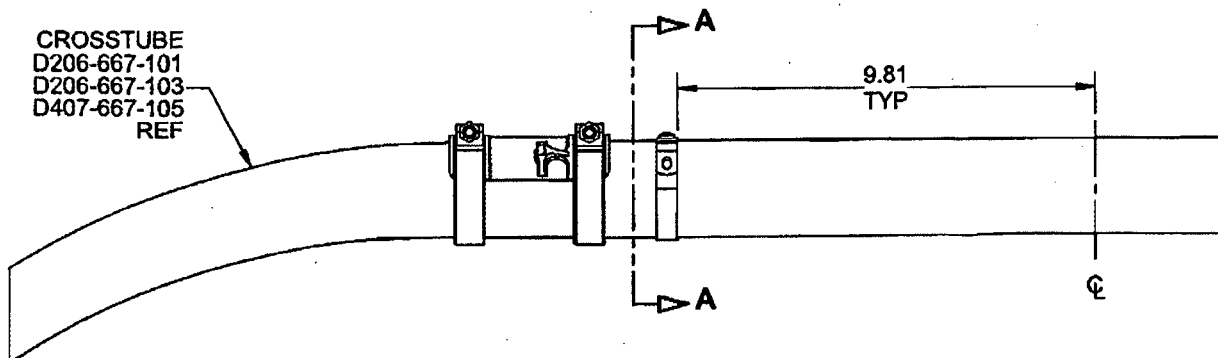
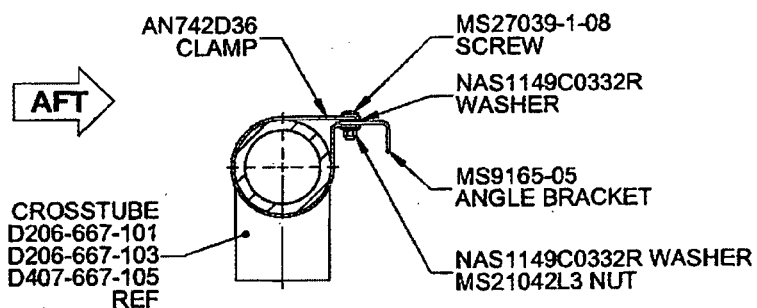


FIGURE 1 - GROUNDING STRAP INSTALLATION
(VIEW LOOKING FWD)








SECTION A-A
(SUPPORT, CLAMP, CUSHION NOT SHOWN FOR CLARITY)
TYP, 2 PL PER CROSSTUBE

CANADA
DEPARTMENT OF TRANSPORT
AIRCRAFT CERTIFICATION
BRANCH
DAO # 01-O-01

APPROVED
BY: *[Signature]*
D. SHEPHERD (DE # 02)

DATE: 11.02.25
CERT. NO.: SH01-5
ISSUE NO.: 3

DESIGN		DART AEROSPACE LTD	
DRAWN		HAWKESBURY, ONTARIO, CANADA	
CHECKED		DRAWING NO.	REV. A
MFG. APPR.	N/A	DSI 9544	SHEET 2 OF 2
APPROVED		TITLE	SCALE
DE APPR.		GROUNDING STRAP INSTALLATION	NTS
DATE	11.02.18	COPYRIGHT © 2011 BY DART AEROSPACE LTD	
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NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY									
Landing Gear			General						
<input type="checkbox"/>	Bending	<input type="checkbox"/>	Bend	<input type="checkbox"/>	Grain	<input type="checkbox"/>	Ovalized	<input type="checkbox"/>	Pressure/Forced
<input type="checkbox"/>	Centre Not Concentric to O/S	<input type="checkbox"/>	BOM/Route	<input type="checkbox"/>	Hardware	<input type="checkbox"/>	Over/Under tolerance	<input type="checkbox"/>	Temperature/Cure
<input type="checkbox"/>	Cracks	<input type="checkbox"/>	Broken/Damaged	<input type="checkbox"/>	Inspection Incomplete	<input type="checkbox"/>	Part Incorrect	<input type="checkbox"/>	Weld
<input type="checkbox"/>	Crushed/Crimped	<input type="checkbox"/>	Burrs	<input type="checkbox"/>	Instructions Incomplete/Unclear	<input type="checkbox"/>	Part Lost/Missing	<input type="checkbox"/>	Wrong Stock Pulled
<input type="checkbox"/>	Cuffs	<input type="checkbox"/>	Contamination	<input type="checkbox"/>	Maintenance	<input type="checkbox"/>	Part Moved	<input type="checkbox"/>	Other
<input type="checkbox"/>	Heat Treat	<input type="checkbox"/>	Countersink	<input type="checkbox"/>	Mislabeled	<input type="checkbox"/>	Positioned Wrong		
<input type="checkbox"/>	Inspection Strip in Tube	<input type="checkbox"/>	Cut Too Short	<input type="checkbox"/>	Misread	<input type="checkbox"/>	Power Loss/Surge		
<input type="checkbox"/>	Ripples in Bend	<input type="checkbox"/>	Drill Holes	<input type="checkbox"/>	Offset				
<input type="checkbox"/>	Torque Waves in Extrusion	<input type="checkbox"/>	Drawing	<input type="checkbox"/>	Out of Calibration				
<input type="checkbox"/>	Turning Sequence	<input type="checkbox"/>	Finish	<input type="checkbox"/>	Out of Sequence				
<input type="checkbox"/>	Wave/Twist in Tube	<input type="checkbox"/>	Folio	<input type="checkbox"/>	Outside Dimensions				



RAPPORT# P-12305

RAPPORT D'INSPECTION NON DESTRUCTIVE
(SUITE)

PAGE 2 DE 2

CLIENT Dart Aerospace
ATTENTION LindaDATE August 3, 2012 HEURE ☒ AM ☐ PM
ACUREN W/O: 188-12-60305 7:30RÉSULTATS ☐ MÉTRIQUE ☐ IMPÉRIALE

- 1) 3X D412-664-263 Crosstube AFT WO ID: B87295-B86985-B86986
PT Done IAW ASTM E1417-05 Found accepted
- 2) 1X D212-664-201 Crosstube AFT WO ID: B85563
PT Done IAW ASTM E1417-05 Found accepted
- 3) 2X D206-667-103 Crosstube FWD WO ID: B88697-B88696
PT Done IAW ASTM E1417-05 and Found accepted
- 4) 2X D407-667-105 Crosstube FWD WO ID: B85313-B85314
PT Done IAW ASTM E1417-05 and Found accepted
- 5) 5X D3011-1 Rappel WO ID: 86212
PT Done IAW ASTM E1417-05 and Found accepted

P/O 17609

12 08 04

Étendue des services

L'entente selon laquelle le Groupe Acuren Inc. Exécute les services ne concerne que les énoncés par écrit. En aucune circonstance ces services ne s'étendent au-delà de l'exécution des services demandés. Il est entendu que toutes les descriptions, les observations et les expressions d'opinions faites par Acuren reflètent les opinions ou les observations de l'entreprise fondées sur l'information et les hypothèses fournies par le propriétaire/opérateur, et elles ne constituent pas des déclarations ou des garanties ou ne peuvent être interprétées comme constituant. Le groupe Acuren Inc. N'assume aucune des responsabilités du propriétaire/opérateur, et le propriétaire/opérateur conserve la responsabilité entière des décisions prises en matière d'ingénierie, de fabrication, de réparation et d'usage à partir de l'information ou des données fournies par Acuren en rapport avec les services décrits dans les présentes ne peuvent excéder le coût des services rendus.

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SIGNATURES

REPRÉSENTANT CLIENT	<u>Andy Sheldon</u>	FTJ#:
TECHNICIEN (SIGNATURE):	<u>Philippe Baré</u>	RAPPORT
NOM (MOULÉ):	<u>Philippe Baré</u>	RÉVISÉ PAR:
	1 ^{er} TECHNICIEN	NOM
	2 nd TECHNICIEN	INITIALES
ONGC NIVEAU <u>2</u> SNT NIVEAU <u>2</u>	ONGC NIVEAU _____ SNT NIVEAU _____	
ONGC N° REGISTRATION <u>12027</u>	ONGC N° REGISTRATION _____	